Psychotherapeutic Support for Children/Caregivers (PSC): Practical Pointers for Primary Care Health Providers Treating the Child with ADHD

This tool provides clinicians with guidelines/suggestions that they can use to direct their clinical interactions with children and caregivers. It includes some basic cognitive behavioural and interpersonal therapy strategies, as well as some core counselling techniques.

**Approach**
- Establish a supportive relationship with the caregiver and child.
- Establish a collaborative approach with the caregiver – providing good treatment services for childhood ADHD requires a good working relationship with the caregiver.
- Include the child as is developmentally appropriate and address their perspective on social, family, academic functioning and feeling about self.

**Be Present-Focused**
- Focus on the current functioning of the child at home and school.
- Help caregivers let go on negative feeling about past interaction with their child. Focus on now, not on the past.
- Help alleviate caregiver’s future-oriented worries by refocusing them on the current issues. A successful future is built on solving the problems of today!

**Be Solution-Oriented**
- Validate caregiver experience of stress/frustration.
- Help parents to identify what leads to successful outcomes.
- Help parents to advocate with the school to implement interventions that can help their child.

**Provide Education**
- Provide education about ADHD to both the caregiver and child.
- Help the caregiver understand that many behaviours are not wilful disobedience or laziness, and help them learn how to differentiate.
- Provide evidence-based information about ADHD including answering questions about ADHD and treatment.
- Refer them to the family resources links in the Suggested Websites section and suggest they research (i.e. “Google” the topic) followed by a future discussion.

**Coping Skills**
- Parenting a child with ADHD can be stressful. When stressed, parents may exhibit negative parenting behaviours such as: yelling, hitting, inappropriate punishment. Help parents understand that such responses,
although common, do not help.

- Provide parents with practical suggestions such as time-out strategies and positive reinforcement techniques. Refer the parents to resources for parent effectiveness training or parent counselling if they are available in the patient’s community.
- Remind parents that many youth with ADHD grow up to be excellent at their work, in the arts, in sports and in their lives.
- Encourage parents to fit their child’s skills to activities. For example, many children with ADHD have difficulty in highly structured team sports (i.e., baseball) but excel at more individual sports (i.e., swimming, tennis).
- Encourage parents to enrol their child in active, structured, pro-social community organizations (e.g., boys / girls clubs).

**Cognitive Strategy**

- Cognitive strategies that are sometimes useful for teens are largely ineffective with young children.
- Help caregivers better understand their emotional reaction to their child’s behaviour.

**Don’t react, Parenting a child with ADHD is challenging!**

**What happened?**

It’s Thursday night, you’re tired after a day of work. You sit with your child to supervise their homework, and find out that they have a math exam tomorrow and they didn’t bring home any notes or book to study.

**YOU GET ANGRY / FRustrated!**

Things like this have happened so many times before…

**Don’t react, “Stop and think”.**

Children with ADHD receive a tremendous amount of negative feedback. Criticism and nagging are not going to improve the actual situation.

Take time to breath and think!

**How you can do it better…**

There is not much that you can do tonight, but at least you can try not to make it worse. You can ask your child to recall what they have been reviewing in class and make some practice exercises together.

Next day, you can ask the teacher to give you the dates of any exams in
advance and help your child to write them down on their agenda, as well as some reminders on days before the exam to help them remember to bring the books needed to prepare in advance.

**Behaviour Strategy**

- Children with ADHD do better in structured environments!
- Establish an organized household routine including meal times, school work and bedtime. This routine should be predictable, but flexible to the child’s needs and should not be rigid.
- Help parents to: create simple systems of organization; develop a token economy at home; the use of charts is useful for children under age of 12 years.
- For more tips and information about parenting and behavioural intervention for children with ADHD, refer to the [references for families](#).

**Token Economy** is a behaviour modification technique that aims to increase desirable behaviour and decrease undesirable behaviour with the use of tokens or small positive rewards at the moment of success, “displaying desirable behaviour”.

The tokens (e.g., stickers, other small objects) are collected and later exchanged for a meaningful object or privilege (e.g., choice of meal for dinner, selection of a favorite book during bedtime story time). A token economy should not take the place of, but rather supplement other parenting techniques such as advice, support, etc. Rewards for children need to be more immediate than with adults. Waiting for the weekend to be rewarded for what the child does on Monday is not useful.

**Medication Intro**

- Provide rationale for using medication to caregivers including the potential benefits, as well as potential risks about the medication.
- Teach parents about how to give medication to children who may have trouble swallowing larger pills that cannot be sprinkled into food. Also discuss with caregivers the need to include the school in medication information if they need to be involved in administering during the school day, as is often the case with short acting medicines (i.e., Ritalin).
- Talk to the child in developmentally appropriate language about the rationale for using medicine. Answer any and all questions about fears or concerns.
- Talk to the child in developmentally appropriate language about side effects, such as upset stomach or constipation, and encourage them to talk to their caregiver should they experience any difficulties. Encourage caregivers to have a regular dialogue regarding side effects with their children, especially when beginning a new medication.
- Encourage parents to bring you information that is anti-medicine to be
discussed with you so that misinformation or disinformation can be corrected.

- Remember to discuss the issue of addiction. Bring it up yourself if the caretaker or child does not do so.

**Medications for ADHD are:**
- Among the most effective treatment in all medicine
- Usually helpful to most children with ADHD
- Usually able to be used without significant side effects

**Medications for ADHD are not:**
- Addictive
- Destructive of the child’s personality
- A crutch

**Be Realistic**
- Discuss with parents reasonable parenting expectations and the needs for ongoing support.
- Discuss expectations and potential obstacles in the treatment course.
- ADHD symptoms have the best chance of improving when child and family are both aware of ADHD and there is agreement with the treatment plan.
- The goal with treatment of ADHD is to achieve remission (i.e., reduce symptoms and improve functioning).

**Be Responsive**
- Be available for urgent matters within office hours (this depends on individual practitioners’ preference and can include phone, email or text messaging).
- Schedule frequent, brief face-to-face visits at times that do not conflict with school (15-20 minutes).
- Monitor and support child’s wellness activities (exercise, sleep, healthy diet, etc.).